**Uncommon Therapy**

### Policy for Payment of Services

A clear understanding of the financial responsibility for your care is fundamental to assuring a healthy and professional relationship with my billing staff and myself. Please read this form carefully. If you have any questions, please call *Golden Heart Administrative Professionals* at **907-459-8200.**

**My Fees:** are based upon usual and customary rates for other Licensed Professional Counselors in the Fairbanks area.

**Payment:** I accept payment by cash, checks or credit/debit cards. In extenuating circumstances, I am willing to work with you to develop a payment plan that is reasonable for both of us.

**Insurance:** Remember that you are ultimately responsible for your bill. If you have private insurance, as a courtesy we will bill your carrier for services. We will need a copy – front and back – of your insurance card to provide proof of insurance, so we can bill for you.

* **Initial Visit:** New patients will be expected to pay $150 towards the cost of the initial intake session at the time of that visit. We will file your insurance and refund to you any overpayment.
* **Insurance Deductibles and Co-Pays:** All patients are expected to pay the full amount of your visits at the beginning of the insurance deductible year until insurance deductibles are shown to have been met. Thereafter, patients are expected to pay co-pays at the beginning of each visit until out-of-pocket expense limits are reached.
* **Monthly Statements:** You will be sent a monthly statement of all balances due. Please compare it to the explanation of benefits you will receive from your insurance company. Feel free to call *Golden Heart Administrative Professionals* at **459-8200** with any questions.
* **Veteran’s Administration, Vocational Rehabilitation, and Office of Children Services:** Patients are required to get all pre-authorizations done before each visit, and have that authorization in your hand or faxed to our office if you would like the these agencies to pay. Otherwise, you will be expected to pay for services rendered.
* **Tricare:** Patients need to have a referral from a physician in order to be seen in this office. Please be sure that I have this referral ***before*** your appointment.

Please keep in mind that Insurance is a contract between you and your insurer. We will be happy to assist you in any way we can. However, we will not become involved in disputes concerning deductibles, co-pays, secondary insurance, or so-called “usual and customary” reductions.

**“No Shows”:** If you fail to cancel, or cancel less 24 hours from your appointment time, you will receive a “No Show” charge of $35. This will be paid before any further appointments will be made.

*Please Note: Insurance or other Payers cannot be billed for this.*

**Past Due/Delinquent Accounts:** You are expected to pay your balance in 15 days of receipt of your statement from *Golden Heart Administrative Professionals*. Past due accounts may be referred for collection if necessary. We will not be liable for any consequences that may result from a collection agency’s effort to secure payment.

**Patient Statement of Acknowledgement:**

I have read and understand the above terms and agree to this policy for payment of services.

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Printed Name of Patient or Guardian Date

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Signature